

POSITION	INITIALS	ID NO.	DATE
	<i>AS</i>		<i>04/10/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		<i>16</i>	<i>41400</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

00574 *6-7-00*

INDEX OF CLAIMS

✓ Rejected	N Non-elected
= Allowed	i Interference
-	(Through numeral)..... Canceled	A Appeal
+ Restricted	O Objected

Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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